


**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/942,524
Filing Date	August 29, 2001
First Named Inventor	Tsu-Chang Lee
Group Art Unit	2643
Examiner Name	not yet known
Attorney Docket Number	10008.000210

I hereby appoint:

Practitioners at Customer Number 

OR

Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

Practitioners at Customer Number 

OR

Firm or Individual Name deGuzman Okamoto & Benedicto LLP

Address P.O. Box 51900

Address

City Palo Alto State CA ZIP 94303

Country U.S.A.

Telephone 650-691-4761 Fax 650-691-2032

I am the:

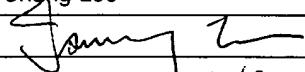
Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Tsu-Chang Lee

Signature 

Date 11/30/2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

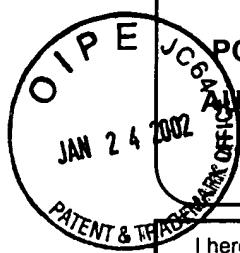
Please type a plus sign (+) inside the box →

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT



Application Number	09/942,524
Filing Date	August 29, 2001
First Named Inventor	Tsu-Chang Lee
Group Art Unit	2643
Examiner Name	not yet known
Attorney Docket Number	10008.000210

I hereby appoint:

Practitioners at Customer Number

OR

Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

Practitioners at Customer Number

OR

Firm or
Individual Name

deGuzman Okamoto & Benedicto LLP

Address P.O. Box 51900

Address

City Palo Alto State CA ZIP 94303

Country U.S.A.

Telephone 650-691-4761 Fax 650-691-2032

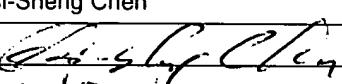
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Hsi-Sheng Chen
Signature	
Date	11/30/2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below*.

*Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT

Application Number	09/942,524
Filing Date	August 29, 2001
First Named Inventor	Tsu-Chang Lee
Group Art Unit	2643
Examiner Name	not yet known
Attorney Docket Number	10008.000210

I hereby appoint:

 Practitioners at Customer Number

OR

 Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number.

OR

 Practitioners at Customer Number

OR

 Place Customer
Number Bar Code
Label here

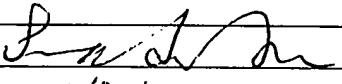
<input checked="" type="checkbox"/> Firm or Individual Name	deGuzman Okamoto & Benedicto LLP				
Address	P.O. Box 51900				
Address					
City	Palo Alto	State	CA	ZIP	94303
Country	U.S.A.				
Telephone	650-691-4761	Fax	650-691-2032		

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

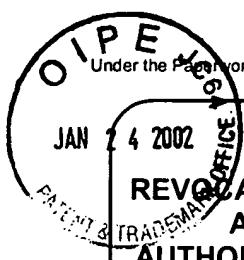
SIGNATURE of Applicant or Assignee of Record

Name	Song H. An	
Signature		
Date	11/30/01	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.


**REVOCATION OF POWER OF
ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/942,524
Filing Date	August 29, 2001
First Named Inventor	Tsu-Chang Lee
Group Art Unit	2643
Examiner Name	not yet known
Attorney Docket Number	10008.000210

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

A Power of Attorney or Authorization of Agent is submitted herewith.

OR

Please change the correspondence address for the above-identified application to:

Customer Number

→

Place Customer
Number Bar Code
Label here

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City			
Country	State	ZIP	
Telephone	Fax		

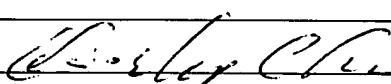
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Hsi-Sheng Chen
Signature	
Date	11/30/2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.


REVOCA
TION OF POWER OF
ATTORNEY OR
AUTHORIZATION OF AGENT

Application Number	09/942,524
Filing Date	August 29, 2001
First Named Inventor	Tsu-Chang Lee
Group Art Unit	2643
Examiner Name	not yet known
Attorney Docket Number	10008.000210

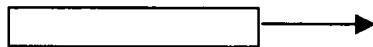
I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

A Power of Attorney or Authorization of Agent is submitted herewith.

OR

Please change the correspondence address for the above-identified application to:

Customer Number



Place Customer
Number Bar Code
Label here

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City			
Country	State	ZIP	
Telephone	Fax		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

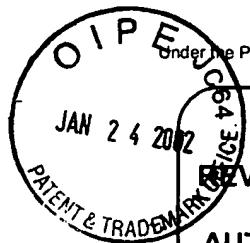
SIGNATURE of Applicant or Assignee of Record

Name	Song H. An	
Signature		
Date	11/30/01	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.


**REVOCATION OF POWER OF
ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/942,524
Filing Date	August 29, 2001
First Named Inventor	Tsu-Chang Lee
Group Art Unit	2643
Examiner Name	not yet known
Attorney Docket Number	10008.000210

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

A Power of Attorney or Authorization of Agent is submitted herewith.

OR

Please change the correspondence address for the above-identified application to:

Customer Number

Place Customer
Number Bar Code
Label here

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City			
Country	State	ZIP	
Telephone	Fax		

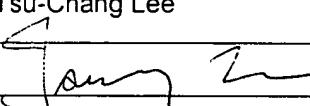
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Tsu-Chang Lee
Signature	
Date	11/30/2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below*.

*Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.